

**DOMESTIC
BUSINESS CORPORATION
STATE OF MAINE
ARTICLES OF CONSOLIDATION**

Minimum Fee \$80 (See §1401 sub-§17)

(A Maine Corporation)

AND

(A Maine Corporation)

FORMING

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 13-A MRSA §903, the undersigned corporations, adopt the following Articles of Consolidation:

FIRST: The name of the new corporation is _____

SECOND: The plan of consolidation is set forth in Exhibit ____ attached hereto and made a part hereof.

THIRD: As to each participating corporation, the number of shares outstanding and the number of shares entitled to vote on such plan, and the number of such shares voted for and against the plan are as follows:

| <u>Name of Corporation</u> | <u>Number of Shares Outstanding</u> | <u>Number of Shares Entitled to Vote</u> | <u>NUMBER Voted For</u> | <u>NUMBER Voted Against</u> |
|----------------------------|-------------------------------------|--|-------------------------|-----------------------------|
|----------------------------|-------------------------------------|--|-------------------------|-----------------------------|

FOURTH: If the shares of any class were entitled to vote as a class, the designation and number of the outstanding shares of each such class, and the number of shares of each such class voted for and against the plan, are as follows:

| <u>Name of Corporation</u> | <u>Designation of Class</u> | <u>Number of Shares Outstanding</u> | <u>NUMBER Voted For</u> | <u>NUMBER Voted Against</u> |
|----------------------------|-----------------------------|-------------------------------------|-------------------------|-----------------------------|
|----------------------------|-----------------------------|-------------------------------------|-------------------------|-----------------------------|

FIFTH: The address of the registered office in the State of Maine of _____
is _____
(street, city, state and zip code)

The address of the registered office in the State of Maine of _____
is _____
(street, city, state and zip code)

SIXTH: Effective date of the consolidation (if other than date of filing of Articles) is _____
(Not to exceed 60 days from date of filing of the Articles)

DATED _____

(name of corporation)

*By _____
(signature)

(type or print name and capacity)

*By _____
(signature)

(type or print name and capacity)

**MUST BE COMPLETED FOR VOTE
OF SHAREHOLDERS**

I certify that I have custody of the minutes showing
the above action by the shareholders.

(name of corporation)

(signature of clerk, secretary or asst. secretary)

DATED _____

(name of corporation)

*By _____
(signature)

(type or print name and capacity)

*By _____
(signature)

(type or print name and capacity)

**MUST BE COMPLETED FOR VOTE
OF SHAREHOLDERS**

I certify that I have custody of the minutes showing
the above action by the shareholders.

(name of corporation)

(signature of clerk, secretary or asst. secretary)

THIS FORM MUST BE ACCOMPANIED BY FORM MBCA-18A (Acceptance of Appointment as Clerk §304.2-A.).

*This document **MUST** be signed by

- (1) the **Clerk** OR
- (2) the **President** or a vice-pres. **together with the Secretary** or an ass't. sec., or a 2nd certifying officer OR
- (3) if no such officers, then a majority of the **Directors** OR
- (4) if no such directors, then the **Holders of a majority of all outstanding shares** OR
- (5) the **Holders of all of the outstanding shares.**

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**